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ABSTRACT

Local Interagency Coordinating Councils (LICCs) have been established in most states to coordinate services to infants and toddlers with special needs and their families. This descriptive study examined the 40 Kansas LICCs, in order to understand the councils' developmental progress and current needs and to gain insight into broader issues of local interagency collaboration. The findings provide guidance for state and local decision-makers in other areas of the country and in other types of human services. Findings indicate that LICCs in this state vary in size from 9 to 78 members, with a median membership of 27 and median attendance of 14. Consumers and spokesperson for the business community are under-represented. LICCs with longer histories and those located in rural areas are likely to have a broader scope, to plan for multiple audiences, and to report more cooperative accomplishments. Newer councils tend to have informal structure, non-controversial projects, and concern about orienting new members. The need for training and technical assistance, preferably delivered on-site, is widespread. Most councils expressed satisfaction with their accomplishments to date. (Contains 12 references.). (WP)

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Evolution of Local Interagency Efforts for Children and Families

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Abstract

Federal and state initiatives to support the development of children and their families frequently require evidence of interagency collaboration and consumer participation in policy making. For example, local interagency coordinating councils (LICCs) have been established in most states to coordinate services to infants and toddlers with special needs and their families and to develop and refine the community's infrastructure for such services.

This descriptive study examined in detail each of the 40 LICCs in Kansas in order to understand the councils' developmental progress and current needs and gain insight into broader issues of local interagency collaboration. The findings may provide guidance for state and local decision-makers in other areas of the country and in other types of human services.

LICCs in this state vary in size from 9 to 78 members with a median membership of 27 and median attendance of 14. Consumers -- family members -- and spokesper-sons for the business community are under-represented.

LICCs with longer histories and those located in rural areas are likely to have a broader scope, to plan for multiple audiences, and to report more cooperative accomplishments. Newer councils tend to have informal structure, non-controversial projects, and concern about orienting new members. Desire for training and technical assistance, preferably delivered on-site, is widespread.

Most councils express satisfaction with their accomplishments to date. Many envision broadening their focus and confronting controversial issues in the near future.

Introduction

With its charge to develop collaboration across disciplines, governmental levels, and economic sectors, Part H of the Individuals with Disabilities Education Act (IDEA, amended by P.L. 102-119) was a pioneering piece of legislation (Gallagher, Trohanis, & Clifford, 1989). Its call to interagency collaboration with consumer involvement has since been repeated in numerous federal, state, and local initiatives beyond disability services.

Dual objectives have guided interagency efforts: (1) to foster the development of a collaborative infrastructure and, thereby, (2) to serve more families and to serve them better (Procedure Manual, 1993; Shotts, 1994).

IDEA requires interagency coordinating councils (ICCs) at federal and state levels. Most states have applied elements of the ICC model to local areas in their efforts to develop a comprehensive, coordinated system of services that addresses the needs of families (National Early Childhood Technical Assistance System, 1994).

Several rationales have been offered for establishing councils at the community level: Local decision-makers who are in daily contact with local families and service providers can determine how to eliminate fragmentation in services as well as proliferation of programs. They can identify and overcome gaps in services. They can simplify access to services for families and encourage communication among families and the providers who serve them. According to LICC proponents, providers and consumers working together in their own locale can determine how to use limited local resources most effectively. They can respond with flexibility, finding ways to meet the needs of young children and their families in natural environments that are consistent with the values of local residents (Hazel et al., 1988). In short, local collaboration can help to produce a coherent system where, perhaps, none existed before. Alternatively, it can enhance existing informal networks (Kagan, Goffin, Golub, & Pritchard, 1995; Swan & Morgan, 1993).

This study sought to understand the developmental course and current needs of LICCs in one Midwestern state--Kansas--in order to gain insight into broader issues of local interagency collaboration.

Background

Since 1984, before the enactment of Part H, Kansas has been served by a state interagency coordinating council (ICC) for children birth through age 5 and their families. Quality early intervention for infants and toddlers has been available for more than 10 years in some locations in the state. Informal interagency efforts on behalf of individual families have long been common, especially in rural areas. By 1991 leaders of the three agencies represented on the state ICC (education, health, and social services) were encouraging more formalized interagency efforts, not only for children with special needs but also for other populations. Several laws passed in the 1990s concerning a variety of children's issues required evidence of local interagency collaboration. At the time of this study, Kansas was nearing the end of the sixth year of Part H implementation (full services). The lead agency for Part H (Kansas Department of Health and Environment) desired an analysis of LICC functioning.

Given Kansans' entitlement to early intervention services, the state relies on local interagency coordinating councils (LICCs) to provide family service coordination, prepare Individualized Family Service Plans, and deliver most services agreed-upon to young children with special needs and their families. Federal funds and modest state appropriations flow to service providers through LICCs.

Unlike a number of states, Kansas has assigned responsibility for the formation of its local councils to its communities. The geographic boundaries for LICCs are not defined by state edict, and only a few of the members for LICCs are prescribed by state regulations. Although the state lead agency has assigned certain duties of coordination for children from birth through age 2 and their families, LICCs have been encouraged to set their own agendas and define the scope of their local missions.

Method

Subjects

All 40 of the state's LICCs were subjects in this study. At the time of the study, 95 of the 105 Kansas counties were served by these locally-generated councils. The other 10 counties received their early intervention services from an adjacent community network but did not have representation on its LICC. Consistent with the geography of the state, 31 of the 40 LICCs are in "mostly rural" areas. Six include a city(ies) of 30,000 to 100,000 inhabitants, and three contain a city with a population larger than 100,000. Geographic coverage varies from an Indian reservation of 11 square miles to an area of 13 counties, larger than several American states. No typical catchment area or population size can be extracted. Most commonly, LICC boundaries parallel county lines, but in other cases, they reflect the area served by a special education cooperative, a hospital, an Indian reservation, or a previously existing cooperative group.

Procedures

The authors developed a 12-page questionnaire that addressed LICC demographics, membership, organization, activities, accomplishments, and training. It was revised after comments from the state's lead agency for Part H. The form was pilot-tested in one community and again revised to improve its clarity.

The questionnaire was then mailed to each community's locally-appointed Part H liaison for perusal prior to a telephone interview. In 25 of the 40 communities, the liaison responded on behalf of all LICC members. In 15 communities, responses were provided by several LICC members or by the entire council. Respondents were not paid for participation in the project. One of the authors interviewed the 40 liaisons or their designees regarding the survey questions. These telephone interviews lasted 30-90 minutes and were audiotaped for later review.

From the interview data, detailed descriptions of the individual LICCs were generated and mailed to the liaisons for editing. During this process, which consumed three months, one council divided itself into four councils, an indication of how fluid some LICC boundaries are, especially in areas where council activity is fairly new.

Responses were summed and, wherever possible, reported as ratios. Verbal descriptions provided in response to the questionnaire's many open-ended items were organized by topic as well as by respondent characteristics (e.g., community size, year of council organization). Subsequently, recommendations were drawn by the authors from the response summaries.

Results

Findings are reported according to the categories of scope, productivity, membership, governance, training preferences, and developmental pattern.

Scope of activity

Target population. Interview data confirm that diversity in target population results in considerable differences in how LICCs spend their time and in what projects they produce. Councils vary considerably in whom they serve. Twenty three of 40 have chosen to coordinate services beyond those for children birth through age 2 with special needs and their families. Half of the councils aim to improve services for children from birth to at least age 5 and their families. The needs of broader populations ("all children birth through age 21," "all families," "all persons with disabilities and their families") are being addressed by 10 of the 40 LICCs.

Relationships with other councils. The scope of activities undertaken appears to be related to the LICC's relationship to other community bodies. The interagency group that coordinates issues related to children birth through age 2 may stand alone, or it may be related to other interagency efforts in a variety of ways:

1. The LICC may be a subgroup of a larger body (9 of 40 communities).

2. Another interagency group may be a subgroup of the LICC (at least 1 of 40 communities).

3. The LICC may have an appointed representative on another council (34 of 40 communities), or vice versa (all 40 communities).

4. The LICC and one or more other interagency bodies may actually be identical (six communities). For example, in one community, three interagency bodies assigned responsibility by state law are actually the same group of people meeting for all purposes one time per month.

Broader linkages lead to broader agendas, as well as, reportedly, to effective time use. Locally-defined relationships with other interagency bodies that fit an LICC's particular context are reportedly helping many councils to accomplish their aims: "Before, we had many councils with mostly the same people, but now we have one group. Participation has increased, and the number of meetings has decreased. The new structure has made the group more effective," said one respondent.

Issues addressed. Respondents reported that, given the opportunities and challenges of building a new system, LICC agendas have been full. Table 1 shows the number of LICCs out of 40 that have included various topics on their agendas during the past year. Activities for relationship building and information exchange have received greatest attention. Both of these activities typically are stressed by the newer LICCs, but they continue to be valued as ways to nurture cooperative efforts, according to respondents. Identification of community needs has been undertaken to establish council priorities.

Similarly, joint public awareness and child find activities are viewed as essential to recruit families for a developing service system. Respondents report that referral/transition issues are inherently interagency in nature as children and their families move between programs: "Natural topics for us to work on together," stated one LICC member.

Productivity

Products. Products developed for community use by LICCs are summarized in Figure 1. Several, such as a resource directory and common intake and release of information forms, are intended to assist families as well as service providers. In addition to these products developed for use by the community, most LICCs have developed internal products to aid their functioning. These will be discussed under governance.

Estimates of productivity. Twenty-eight percent of respondents judge their LICC to be "very productive," while 55 percent view it as "moderately productive." Open-ended comments suggest that many respondents included relationship-building as well as tangible products in their assessments of productivity. More than two-thirds of respondents are "satisfied" or "somewhat satisfied" with their LICC's productivity.

Open-ended comments typically reflect awareness of the challenges of planning and implementing interagency efforts, given limited resources: For example, "It has taken a good year to develop as a group and to be able to give direction and support to our taskforces. The process takes time."

Formal evaluation of efforts. Among the councils more than four years old, several have conducted formal evaluations to determine satisfaction with quality and quantity of services as well as to locate gaps in services. Most LICCs, however, are relying upon either informal feedback or the evaluation of a single event to judge their effectiveness.

Barriers to productivity. As reported in these interviews, continuing barriers to achievement revolve around two primary issues:

1. The ongoing need to orient all LICC members to the purpose, underlying laws, and interagency nature of council activities to enable them to move forward together. Such a shared understanding is judged by respondents to be especially important because Part H is conceptually different from previous initiatives in special education and other human services.

2. The process of change from how services were accomplished previously to the way(s) they are to be delivered now. Asked one respondent, "How do you build a new system without destroying the old system?"

Other frequently mentioned barriers to achievement include the shortage of money, time, and personnel to accomplish goals; difficulties in communicating; differences in philosophies and missions among agencies; and turfism.

Membership

Size. LICCs in this state vary in size from 9 to 78 members, with a median membership of 27. Typical attendance, however, is significantly less, varying from 4 persons to 32, with median attendance of 14. Many councils report struggling with the issue of size, wanting to enlist commitment from diverse constituent groups and yet remain small enough to maintain relationships and a shared focus. This challenge appears to be especially acute in larger cities with a greter number of potential participants. Reported resolutions to the dilemma include (a) the use of multiple committees and (b) the election of an executive council with rotating membership by the larger council.

Agency participation. Agencies represented on at least half of the LICCs include education, health, social services (all three required by regulations), mental health, and hospital. Parents as Teachers, a developmental program open to all parents whose children are birth to 3 in age, is represented on 31 of the 40 councils. Early childhood education is represented on 18 of the 40 LICCs, and higher education on 14. Community businesses send delegates to five of the councils.

Decision-making authority. For the majority of LICCs (33 of 40), members attending the meetings reportedly have the authority to commit resources to carry out the council's decisions. This is true in spite of the fact that, according to the statewide interviews, direct service providers tend to participate more frequently than mid-level administrators, and mid-level administrators attend more than agency heads. This trend, however, depends upon the size and population of the area served by the LICC: In larger communities, administrators are more likely to attend than personnel who relate directly to families.

Family participation. Parent membership on local councils ranges from zero to nine, with an average of three family members per council. Twenty five councils report having no parents or only one present at 60% of their meetings. These findings exist in the context of (a) the state's strong profamily philosophy for Part H and (b) state regulations that require the membership of at least two parents of children with disabilities on each LICC (Procedures Manual, 1993). Councils where parents have become active appreciate family contributions: "Comments from family members continually remind us why we're here," said one respondent.

Several strategies are being tried by some councils to encourage family participation (see Figure 2). These include providing child care and mileage reimbursement. According to the interview data, 18 of the 40 LICCs have arranged their meeting schedule to encourage attendance by employed family members. Respondents report that LICCs have been

more likely to consider agency representatives' schedules (31 councils) and service providers' schedules (24 councils) in choosing meeting times.

Governance

LICC frameworks. The literature on organization of interagency efforts typically calls for mission statements, written interagency agreements, bylaws, systematized procedures, and regular meeting schedules to frame the collaborative effort (Hazel et al., 1988; Melaville & Blank, 1993; Swan & Morgan, 1993).

Thirty-four of the 40 Kansas LICCs have developed mission statements; these typically are concise declarations of a global objective. Although the mission statements are brief, they were not necessarily easy to create: "There are so many different missions represented (in our group)...It has been necessary to blend these into a multi-agency mission so that everyone felt they were getting something from it."

Twenty-eight of the 40 councils have developed written interagency agreements or contracts to define, at least to some degree, their working relationships. Only nine have bylaws. One respondent appeared to speak for many: "We've gotten off to a real start but need time to refine everything." Said another: "The kinks are not yet worked out for smooth operation."

Selections of leaders. Leaders are chosen by consensus (15 councils), election (9 councils), volunteering (9 councils), rotation of responsibility (2 councils), and paid staff (2 councils). Half of the LICCs report that they have not yet decided how long their chairpersons will serve.

Meeting times. These generally are routinized. Thirty-seven councils have a regular meeting day, while 36 have a regular meeting time. Fewer than half of the councils meet monthly (16). Six meet bi-monthly, and 15 meet quarterly.

Structure. Most LICC business is said to be transacted by the whole council, but all communities reported using committees, either on a short-term basis or as part of the permanent organizational structure. Nineteen different functions were reported for committee action, most commonly, child find/screening (17 councils), family issues (11 councils), and service coordination and public awareness (10 councils each). Nine of the 40 councils have executive committees that, in most cases, meet more frequently than the entire LICC.

Very few of the councils have paid staff, and those employees typically carry diverse responsibilities, with LICC efforts being only a small percentage of their work assignments. The resulting reliance on voluntary efforts is seen as an advantage by some groups because it builds ownership of LICC projects. Conversely, other councils believe that acquiring staff support would hasten their progress.

Financial support. Respondents indicated that their councils are relying heavily on the small grants and occasional special projects funds that have come from the Part H lead agency. They also depend upon member contributions of services, staff time, and funds to support interagency efforts. Several LICCs have sought outside grants to fund their collaborative projects, but most have not.

Training

Because interagency collaboration tends to be difficult and because few parents or service providers have been formally prepared to do it, many LICCs wish to receive training to help them progress faster. The interviews revealed strong preferences about training options. It appears from the data, moreover, that state leaders, professional organizations, and grant projects interested in developing training and technical assistance to LICCs in this state must provide a menu of options if they wish to address diverse local needs and preferences.

Time for training. Although most respondents voiced specific (often strong) preferences for training times, there was no consensus--or even a trend--as to the best time.

Location for training. Respondents want training delivered close to home. Sixty-five percent prefer local workshops to regional training or statewide conferences. Fifty percent wish to receive technical assistance locally; that is, they want on-site action planning for council development. One-third desire a mentoring system whereby more experienced LICCs assist their neighboring councils. Half the respondents said they would read an LICC newsletter, and one-fourth seek the establishment of a central resource library that mails LICC-related publications to community members. Teleconferencing is controversial: Some groups prefer it, while approximately an equal number noted their dislike for this medium.

Training topics for council leaders. Two topics were favored by more than half of the respondents: how to bring important stakeholders to the interagency table, and strategic planning. Approximately one-fourth of the LICCs seek leadership training on the following topics: methods to disseminate information, group process, and conducting a productive meeting. Little interest was expressed in training in conflict resolution for LICC leaders. One respondent noted that this was due to the relative youth of her community's council and the fact that projects undertaken in the early stages of council formation have had broad consensus from the membership.

Representatives from several more mature LICCs, however, commented about "turfism" and the desire for something better: "We need training in collaboration."

Training topics for LICC members. Half of the respondents wish their LICC members to receive training in the basics of local council operation: local mission, relevant laws, and services and programs provided by various state and local agencies. Approxi-

mately one-fourth of LICCs say they would appreciate training in group process and problem-solving skills. Other topics requested for members' training include effective transition practices, conflict resolution, and strategic planning.

A common request of respondents was for access to outside facilitators who can help LICC members analyze the results of their needs assessment and conduct strategic planning efforts.

Other training needs. Several respondents expressed the wish that state agencies would train their local and regional personnel regarding Part H of P.L. 102-119 as well as the philosophy and practices of Infant-Toddler Services. The purpose of such training would be for all personnel across agencies to learn how their own agency's mission meshes with the Part H initiatives.

Developmental Patterns

A few of these councils are 10 to 18 years old, and many are built upon previous, less formal cooperative interagency relationships. However, most councils (30 of 40) have initiated their current structure since 1990. The councils that are older are likely to have a broader mission and to have more affiliations with other interagency bodies, although this is not true in every case.

The data suggest a widespread openness to change in LICC mission: "We need to learn to think globally--to move from Part H to birth-21 in mission," said one respondent. "More and more of our members are thinking wrap-around and year-around services," said another. He explained that this locally-chosen goal could not be achieved with the group's original narrow focus and small membership.

In communities where the formal council is only a few years old, LICCs report major emphasis on tasks such as determining the membership and establishing operating procedures. Newer LICCs tend to be fostering interagency coordination on single-facet, non-controversial issues that build broad-based community ownership (e.g., needs assessment, Parent University, media campaigns).

A number of older councils have worked for years on singular tasks of cooperation and coordination, with broad consensus. Now they are considering how to move onward to collaboration, which has been defined as sharing of resources, power, authority, and costs among agencies in order to achieve complex goals that could not be accomplished independently (Kagan, 1991).

Several respondents verbalized the need, as their council matures, to resolve sensitive issues. These include definition of responsibilities of local lead and fiscal agencies, evaluation of the cost-effectiveness of services, complying with increased requests for services without accompanying expansion of funds, support for co-payment

fees, and recruitment of professional personnel to rural areas. Several LICCs requested technical assistance to move into a more mature, although more challenging, phase of interagency effort.

Discussion

This study has presented data from a state that has actively encouraged LICC formation but has allowed local residents to define their own community's boundaries and to create varied structures that promise to serve local families appropriately. Many have chosen to plan for a larger, more diverse population than birth through age 2/special needs and to carry out, in addition to Part H requirements, the interagency mandates of other state initiatives for children.

Across the 50 states, many communities are developing some form of interagency structure. We believe that many of the data reported here are likely to be generalizable to states and communities in other parts of the nation. Nevertheless, in the words of one respondent, "It is important to look at LICC structure and goals individually--by community--and to look at what works (there) rather than with a standardized template."

This study did not rate the accomplishments of individual LICCs or undertake comparative analyses. It appears, however, that many of these LICCs are taking on projects with potential for significant positive impact on young children with special needs and their families. A noteworthy question is whether the LICCs will also have the systemic impact intended for these collaborative efforts, i.e., to build an infrastructure that will positively shape the service systems which cohere in the LICC.

Activities--which may or may not succeed--toward this goal include (a) progress in attracting, orienting, and meaningfully involving families in local policy-making; (b) fulfilling current commitments while reaching beyond the disabilities community to involve more representatives from early care and education, business, and local government in actively developing programs for children and families; (c) underscoring the potential contributions of diverse participants, especially consumers, in building human services; (d) collaboratively creating new services that include all the community's families; (e) merging funds to accomplish shared goals; and (f) seeking and attracting new funds to accomplish identified objectives.

Taking on difficult issues may build the interdependence of the local system's components, promote individualized approaches, and increase alternatives for families. On the other hand, community deference to the sensitivity of familiar providers or locally-prominent families about certain issues may hinder both system improvment and interagency communication.

One comment from the study foreshadows substantive challenges that may lie ahead for councils as they move beyond the initial stages of organizing: "We are afraid to address the issues of cost effectiveness or duplication of services because they might

offend." Another council, which had already dealt with such issues openly, stated: "We had some rough times for a while, but now we're stronger for having talked it all out."

Data presented here are consistent with the observations of other researchers (Black & Kase, 1963; Elder & Magrab, 1980; Melaville & Blank, 1993; Morgan, Guetzloe, & Swan, 1991) that LICCs typically pass through the formative stage of members getting acquainted and accomplishing modest achievements and then move on to cooperate on more complex efforts such as child find and joint application procedures. The latter may be a precursor to even more systemic change. Most Kansas LICCs do not yet evidence the final stage proposed in the interagency literature, true collaboration.

Kagan (1991) argues that the pace of progress through these stages is dramatically affected by an array of mediating variables that can hasten or halt a collaboration's efforts. These variables include (a) the goals chosen for effort; (b) the ways in which available resources are shared and pooled; (c) the degree to which power and authority are shared in an egalitarian fashion; (d) access to a supportive, effective, flexible leader(s); (e) events and attitudes expressed during the process of developing an interagency agreement; and (f) the amount of flexibility in individual, agency, and interagency roles displayed by LICC participants.

Many of these elements can be controlled or shaped by LICC members and should receive attention. Some of them, however, cannot be managed, even by the most capable community leaders:

> What few understand is that collaboration is a micro strategy subjected to macro events. Optimistic participants and policy makers can prepare themselves for inevitable setbacks if they understand that collaborations address problems that are chronic rather than acute, systemic rather than peripheral. Expectations must be realistic and circumscribed. Collaborations...can reduce fragmentation; they can help make services more accessible for some children and parents; and they can bring a modicum of coherence to policy and planning (Kagan, 1991, p. 83).

The data reported here provide evidence that such accomplishments are underway, local issue by local issue, community by community, statewide.

Recommendations

To support LICCs in both assisting families and building the infrastructure for services, state leaders must provide localized technical assistance. In addition,

1. Longitudinal research is needed on these councils as to whether, and under what conditions, they move to greater collaboration and service integration.

2. Publicizing various models of LICC organization and the variety of ways that local agencies have developed to pool expertise may motivate additional efforts.

3. Demonstration of ways that multiple state and federal initiatives can be combined may assist communities in creating a more comprehensive service system.

4. Publicizing solutions to common problems can hearten LICCs as well as suggest workable strategies.

5. Publishing a state directory of LICCs, together with frequently updated lists of their products, may encourage peer mentoring among local councils.

6. Innovative strategies for block grant funds, leveraging, and resource raising should be shared across communities.

7. Advice from parent groups and LICCs that have been successful in developing extensive family participation in local policy making should be shared with councils that are currently less successful in involving consumers.

References

Black, B. J., & Kase, H. M. (1963). Interagency cooperation in rehabilitation and mental health. Social Services Review, 37(1), 26-32.

Elder, J. O., & Magrab, P. R. (Eds.). (1980). Coordinating services to handicapped children: A handbook of interagency collaboration. Baltimore: Paul H. Brookes Publishing Company.

Gallagher, J. J., Trohanis, P. L., & Clifford, R. M. (Eds.). (1989). Policy implementation & PL 99-457: Planning for young children with special needs. Baltimore: Paul H. Brookes Publishing Company.

Hazel, R., Barber, P. A., Roberts, S., Behr, S. K., Helmstetter, E., & Guess, D. (1988). A community approach to an integrated service system for children with special needs. Baltimore: Paul H. Brookes Publishing Company.

Kagan, S. L. (1991). United we stand: Collaboration for child care and early education services. New York: Teachers College Press.

Kagan, S. L., Goffin, S. G., Golub, S. A., & Pritchard, E. (1995). Toward systematic reform: Service integration for young children and their families. Falls Church, VA: National Center for Service Integration.

Melaville, A. I., & Blank, M. J. (1993). Together we can: A guide for crafting a profamily system of education and human services. Washington, DC: U.S. Department of Education and U.S. Department of Health and Human Services.

Morgan, J. L., Guetzloe, E. C., & Swan, W. W. (1991). Leadership for local interagency coordinating councils. Journal of Early Intervention, 15(3), 255-267.

National Early Childhood Technical Assistance System. (October 12, 1994). Personal communication with J. Shackelford.

Procedures manual for infant-toddler services in kansas (part H of IDEA). (1993). Topeka, KS: Kansas Department of Health and Environment.

Shotts, C. (1994). Getting started: Developing a local interagency coordinating council. Jefferson City, MO: Missouri First Steps, and McPherson, KS: Bridging Early Services Transition Project Outreach.

Swan, W. W., & Morgan, J. L. (1993). Collaborating for comprehensive services for young children and their families: The local interagency coordinating council. Baltimore: Paul H. Brookes Publishing Company.

Table 1

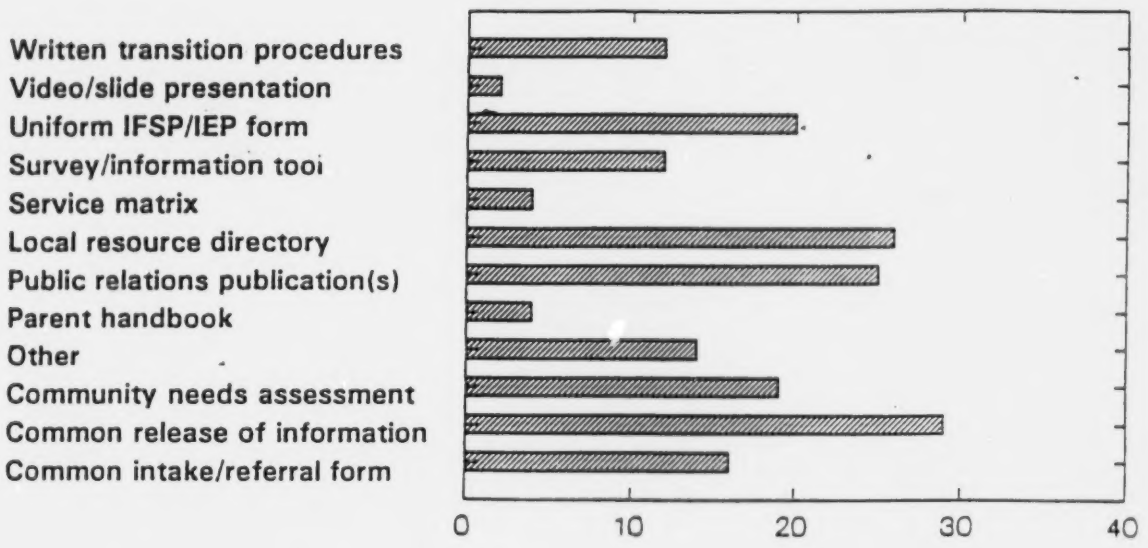
Items on LICC Agendas during the Past Year

Issue	Number of LICCs
Information exchange	37
Informal networking	36
Identification of community needs	32
Joint public awareness activities	32
Child find and screening	30
Interagency referral/transition procedures	28
Interagency service coordination	28
Eliminating service gaps or duplication	22
Development of grant proposals	22
Joint sponsorship of event(s)	21
Improving evaluations; reducing duplications in assessment	20
Advocacy for children and families	18
Development of new services	18
Coordination of parent support	17
Developing standardized forms	16
Joint staff development	14
Problem-solving for families with complex needs	13
Evaluation of interagency activities	13

Joint annual budgets	13
Development of interagency tracking system	12
Modification of agency policies/procedures	10
Joint funding of personnel/programs	10

Figure 1

PRODUCTS OF KANSAS LICCs



(N-40)

Number of LICCs

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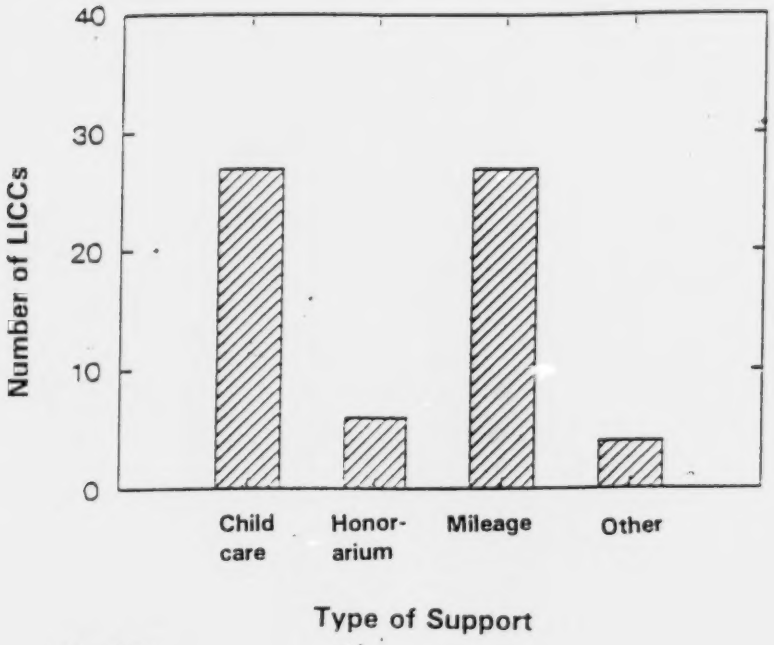
Figure 2

SUPPORT TO FAMILIES TO PARTICIPATE IN LICC



(N = 40)